

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF VENTURA  
FAMILY LAW/PROBATE DEPARTMENT  
REQUEST FOR CONTINUANCE**

**RETURN FAX:**

VENTURA: Dept. 31, 33, 34 (805) 477-7118

Dept. 32 (805) 477-1900

Dept 44 (805) 662-6712

SIMI VALLEY: (805) 582-7546

Case No: \_\_\_\_\_

Case Name: \_\_\_\_\_

COURTROOM:

31 32 33 34 S2 44 OTHER: \_\_\_\_\_

FOR COURT USE ONLY FILE STAMP

Requesting Party: \_\_\_\_\_

Attorney For: \_\_\_\_\_

Responding Party: \_\_\_\_\_

Attorney For: \_\_\_\_\_

Fax No.: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Fax No.: \_\_\_\_\_

Phone No.: \_\_\_\_\_

I/We request that the following matter be continued: Number of total continuances on this matter: \_\_\_\_\_

OSC ON TRO

OSC

NOTICED MOTION

MSC

TRIAL

OTHER: \_\_\_\_\_

From: \_\_\_\_\_ at \_\_\_\_\_ To: \_\_\_\_\_ at \_\_\_\_\_

REASON FOR CONTINUANCE:

Service not completed in a timely manner

Matter settled – written order/judgment being prepared

Expert's report not completed

Unavailability of party or counsel because: \_\_\_\_\_

Other: \_\_\_\_\_

SIGNATURE OF REQUESTING PARTY/ATTY: \_\_\_\_\_

SIGNATURE OF RESPONDING PARTY/ATTY: \_\_\_\_\_

SIGNATURE OF DCSS (IF APPLICABLE): \_\_\_\_\_

***Response from the court will be faxed to the requesting party only.***

**RESPONSE FROM COURT: Request for Continuance is: GRANTED DENIED**

Requesting party must pay the continuance fee of \$20.00 to the court within ten (10) days. If the court date is being continued for less than ten days, the fee must be paid prior to the new date.

**Additional Comments:**

Dated: \_\_\_\_\_

\_\_\_\_\_  
JUDICIAL OFFICER